| | | - | _ | | |
|-----------------|---------------------------|------------------------|--------------------|---------------------------|------------------------------------|
| Facility Name | DEBBIE SIMPKINS | Contact | Simpkins, Debbie A | Full Time | Υ |
| Address | 803 10th St | Phone # | 608-436-9035 | Certified Capacity | 3 |
| | Beloit, WI 53511-5251 | Certified Date | 04/23/2009 | From Age | 0 Year(s), 3 Month(s), 0 Week(s) |
| Category | PROVISIONAL CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | | Hours | 06:00 AM-02:00 PM | Star Level | 2 Stars |
| Provider Number | 0000584690 | Location Number | 001 | | |
| Facility Name | LAURA M WORACHEK | Contact | Worchek, Laura M | Full Time | Υ |
| Address | 3238 Westminster Rd | Phone # | 608-754-3211 | Certified Capacity | 3 |
| | Janesville, WI 53546-9649 | Certified Date | 10/11/2012 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | PROVISIONAL CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 06:00 AM-06:00 PM | Star Level | 2 Stars |
| Provider Number | 3000587553 | Location Number | 001 | | |
| Facility Name | VICTORIA DOYLE | Contact | Doyle, Victoria L | Full Time | Υ |
| Address | 923 Highland Ave | Phone # | 608-718-7562 | Certified Capacity | 3 |
| | Beloit, WI 53511-6016 | Certified Date | 07/31/2015 | From Age | 5 Year(s), 0 Month(s), 0 Week(s) |
| Category | PROVISIONAL CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | | Hours | 03:00 PM-05:00 AM | Star Level | Unknown |
| Provider Number | 2000588602 | Location Number | 001 | | |
| Facility Name | AMANDAY N AVERY | Contact | Avery, Amanda N | Full Time | Υ |
| Address | 447 N Terrace St | Phone # | 608-352-7429 | Certified Capacity | 3 |
| | Janesville, WI 53548-3656 | Certified Date | 06/15/2015 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 09:00 AM-04:30 PM | Star Level | Unknown |
| Provider Number | 6000588616 | Location Number | 001 | | |
| Facility Name | ANNETTE SMITH | Contact | Lewis, Annette H | Full Time | Υ |
| Address | 204 Middle St | Phone # | 608-313-4543 | Certified Capacity | 3 |
| | Beloit, WI 53511-4366 | Certified Date | 02/16/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 8 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 05:00 AM-09:00 PM | Star Level | 2 Stars |
| Provider Number | 8000585488 | Location Number | 001 | | |

| Facility Name | DAWN ALFT | Contact | Alft, Dawn | Full Time | Υ |
|-----------------|---------------------------------|------------------------|-------------------|---------------------------|------------------------------------|
| Address | 6952 S State Road 213 | Phone # | 608-436-1496 | Certified Capacity | 3 |
| | Beloit, WI 53511-9498 | Certified Date | 09/20/2011 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Mar-Feb | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 04:00 AM-08:00 PM | Star Level | 2 Stars |
| Provider Number | 0000576230 | Location Number | 002 | | |
| Facility Name | HUGGABLE LOVEABLE FAMILY DC INC | Contact | Hankins, Vicki | Full Time | Υ |
| Address | 1331 Frederick St | Phone # | 608-362-8997 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 01/05/1997 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | 131126 | Hours | 06:00 PM-10:00 PM | Star Level | 2 Stars |
| Provider Number | 8000555708 | Location Number | 001 | | |
| Facility Name | JILL'S PLAYHOUSE LLC | Contact | Etringer, Jill K | Full Time | Υ |
| Address | 923 Merrill Ave | Phone # | 608-365-5623 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 02/01/2007 | From Age | 0 Year(s), 0 Month(s), 4 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | 1011596 | Hours | 06:00 PM-10:00 PM | Star Level | 3 Stars |
| Provider Number | 7000581257 | Location Number | 002 | | |
| Facility Name | MUNOZ FAMILY CHILD CARE | Contact | Munoz, Misty A | Full Time | Υ |
| Address | 47 W High St | Phone # | 608-449-3336 | Certified Capacity | 3 |
| | Milton, WI 53563-1625 | Certified Date | 01/16/2014 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | 2002193 | Hours | 06:00 PM-10:00 PM | Star Level | 2 Stars |
| Provider Number | 6000588126 | Location Number | 001 | | |
| Facility Name | NIKKI'S NURSERY NEST | Contact | Ames, Nicolette K | Full Time | Υ |
| Address | 2906 King St | Phone # | 608-931-9128 | Certified Capacity | 3 |
| | Janesville, WI 53546-5636 | Certified Date | 08/05/2013 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 05:00 AM-06:00 PM | Star Level | 2 Stars |
| Provider Number | 9000587889 | Location Number | 001 | | |
| | | | | | |

| Facility Name | ONE 2 3 YOU AND ME | Contact | Hanna, Jan Lynette | Full Time | Υ |
|-----------------|---------------------------|------------------------|---------------------|---------------------------|------------------------------------|
| Address | 731 W Grand Ave | Phone # | 608-365-6241 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 04/28/2006 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | 1010522 | Hours | 07:00 PM-11:00 PM | Star Level | 2 Stars |
| Provider Number | 4000571014 | Location Number | 003 | | |
| Facility Name | SHERI POUNDS | Contact | Pounds, Sheri L | Full Time | Υ |
| Address | 1239 Porter Ave | Phone # | 608-362-7947 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 06/01/2005 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 13 Year(s), 0 Month(s), 0 Week(s) |
| Facility ID | | Hours | 07:00 AM-11:00 PM | Star Level | 2 Stars |
| Provider Number | 3000579863 | Location Number | 001 | | |
| Facility Name | SHIRLEY A SHAW | Contact | Shaw, Shirley | Full Time | Υ |
| Address | 4241 N Polaris Pkwy | Phone # | 608-295-6996 | Certified Capacity | 3 |
| | Janesville, WI 53546-9611 | Certified Date | 09/17/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 07:30 AM-11:30 PM | Star Level | 2 Stars |
| Provider Number | 9000585239 | Location Number | 002 | | |
| Facility Name | TARMUNI FITZGERALD | Contact | Fitzgerald, Tarmuni | Full Time | Υ |
| Address | 2175 Hayfield Ln | Phone # | 608-363-8950 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 12/20/2004 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 05:30 AM-12:00 PM | Star Level | 2 Stars |
| Provider Number | 9000576359 | Location Number | 002 | | |
| Facility Name | THE BIG RED HOUSE DAYCARE | Contact | Strommen, Shelley L | Full Time | Υ |
| Address | 1003 Merrill Ave | Phone # | 608-295-2913 | Certified Capacity | 3 |
| | Beloit, WI 53511-5152 | Certified Date | 05/24/2010 | From Age | 0 Year(s), 0 Month(s), 0 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | 2002094 | Hours | 06:00 PM-09:00 PM | Star Level | 2 Stars |
| Provider Number | 0000585590 | Location Number | 001 | | |

| Facility Name | TIPLER DAY CARE | Contact | Tipler, Virgie M | Full Time | Υ |
|-----------------|-------------------------|------------------------|-------------------|---------------------------|------------------------------------|
| Address | 1707 Morse Ave | Phone # | 608-363-1129 | Certified Capacity | 3 |
| | Beloit, WI 53511-3529 | Certified Date | 02/02/1997 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Category | REGULAR CERTIFIED | Months | Oct-Sep | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | | Hours | 01:00 PM-01:00 AM | Star Level | 2 Stars |
| Provider Number | 7000555647 | Location Number | 001 | | |
| Facility Name | WOFFORD FAMILY DAY CARE | Contact | Wofford, Bobbie J | Full Time | Υ |
| Address | 2443 Shopiere Rd | Phone # | 608-365-7187 | Certified Capacity | 3 |
| | Beloit, WI 53511 | Certified Date | 12/29/1996 | From Age | 0 Year(s), 0 Month(s), 6 Week(s) |
| Category | REGULAR CERTIFIED | Months | Jan-Dec | To Age | 12 Year(s), 11 Month(s), 0 Week(s) |
| Facility ID | 1002854 | Hours | 05:00 PM-09:00 PM | Star Level | 2 Stars |
| Provider Number | 5000555685 | Location Number | 001 | | |